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Bib Data Sheet

CONFIRMATION NO. 1469

SERIAL NUMBER 10/790,411	FILING OR 371(c) DATE 03/01/2004 RULE	CLASS 379	GROUP ART UNIT 2614	ATTORNEY DOCKET NO.
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 05/20/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY KS	SHEETS DRAWING 1	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 4
35 USC 119 (a-d)-conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

26263

**TITLE**

C2P PROVISIONING LATE-BREAKING SCENARIOS

FILING FEE RECEIVED 1072	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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